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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
With Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

First Named Inventor

RICO NOVELLA, Francisc

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR SENDING AND VALIDATING DOCUMENTS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

01/10/2003

as United States Application Number or PCT International

Application Number

PCT/ES03/00008

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
P200200070	SPAIN	01/15/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number: <input type="text"/>				OR <input checked="" type="checkbox"/> Correspondence address below	
Name <u>RICO NOVELLA, Francisco, Jose</u>					
Address <u>Avda. Europa 42-Local A-POZUELO DE ALARCÓN</u>					
City <u>MADRID</u>		State <u>MADRID</u>		ZIP <u>28224</u>	
Country <u>SPAIN</u>		Telephone <u>+34 915102736</u>		Fax <u>+34 91510 2736</u>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>Francisco Jose</u> <u>1.00</u>			Family Name or Surname <u>RICO NOVELLA</u>		
Inventor's Signature <u>[Signature]</u> <u>ESX</u>				Date <u>07/08/2004</u>	
Residence: City <u>Madrid</u>		State <u>Madrid</u>		Country <u>SPAIN</u> Citizenship <u>SPANISH</u>	
Mailing Address <u>Avda. Europa 42-Local A-POZUELO DE ALARCÓN</u>					
City <u>Madrid</u>		State <u>Madrid</u>		ZIP <u>28224</u> Country <u>SPAIN</u>	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>JORDI</u> <u>2.00</u>			Family Name or Surname <u>FORGA ALVERICH,</u>		
Inventor's Signature <u>[Signature]</u> <u>ESX</u>				Date	
Residence: City <u>Madrid</u>		State <u>Madrid</u>		Country <u>SPAIN</u> Citizenship <u>SPANISH</u>	
Mailing Address <u>Avda. Europa 42-Local A-POZUELO DE ALARCÓN</u>					
City <u>Madrid</u>		State <u>Madrid</u>		ZIP <u>28224</u> Country <u>SPAIN</u>	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>2</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Emilio		SANICENTE GARGALLO	
Inventor's Signature <i>[Signature]</i>		Date 07/08/2004 <i>ESX</i>	
Residence: City	MADRID	State	MADRID
		Country	SPAIN
Citizenship SPANISH			
Mailing Address Avda. Europa 42 local A Pozuelo de Alarcón			
Mailing Address			
City	Madrid	State	Madrid
		Zip	28224
		Country	Spain
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jorge		MATA DIAZ	
Inventor's Signature <i>[Signature]</i>		Date 07/08/2004 <i>ESX</i>	
Residence: City	MADRID	State	MADRID
		Country	SPAIN
Citizenship ES			
Mailing Address Avda. Europa 42 local A Pozuelo de Alarcón			
Mailing Address			
City	Madrid	State	Madrid
		Zip	28224
		Country	Spain
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Luis Javier		DE LA CRUZ LLOPIS	
Inventor's Signature <i>[Signature]</i>		Date 07/08/2004 <i>ESX</i>	
Residence: City	MADRID	State	MADRID
		Country	SPAIN
Citizenship ES			
Mailing Address Avda. Europa 42 local A Pozuelo de Alarcón			
Mailing Address			
City	Madrid	State	Madrid
		Zip	28224
		Country	Spain

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Juan Jose		ALINS DELGADO	
Inventor's Signature		Date 07/08/2004	
Residence: City	State	Country	Citizenship
MADRID	MADRID	SPAIN	SPANISH
Mailing Address Avda. Europa 42 local A Pozuelo de Alarcón			
Mailing Address			
City	State	Zip	Country
Madrid	Madrid	28224	Spain
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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